

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	10	051321	
O.I.P.E. CLASSIFIER		529	
FORMALITY REVIEW	TV	820	07 11 01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	Original
1	
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10	0
11	0
12	✓
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16	✓
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18	✓
19	✓
20	0
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22	0
23	0
24	✓
25	0
26	✓
27	0
28	0
29	0
30	0
31	0
32	0
33	0
34	0
35	✓
36	✓
37	0
38	0
39	0
40	✓
41	-
42	-
43	-
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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